

# **EXHIBIT C**

IN THE CIRCUIT COURT FOR SHELBY COUNTY, TENNESSEE AT MEMPHIS

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ZENA RAYFORD,  
PLAINTIFF,

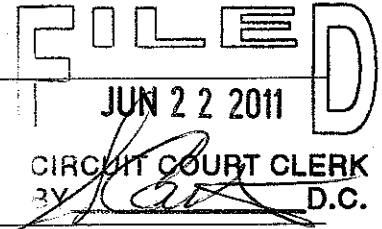
vs.

THE STANDARD INSURANCE COMPANY,  
DEFENDANT.

Case No. *CT002954-11*  
*Div. II*

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COMPLAINT



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Comes now your plaintiff, Zena Rayford, by and through her undersigned counsel, and  
sues the defendant, The Standard Insurance Company (herein "Standard"), and for cause of  
action states and shows the court as follows:

1. The plaintiff, Zena Rayford, is a resident of Fulton County, Georgia;
2. That at all times herein mentioned, Standard is a foreign corporation with its  
principal place of business in Oregon. The defendant's agent for service of process is the  
Tennessee Commissioner of Insurance, Davey Crockett Tower, Suite 500, Nashville, Tennessee  
37243-0565;
3. This court has jurisdiction pursuant to the Tennessee Rules of Civil Procedure.  
Moreover, a previous case was dismissed in the Western District Court at Memphis based upon a  
lack of subject matter jurisdiction.
4. This is a civil action to recover long term disability benefits pursuant to a long  
term disability insurance policy provided by her former employer, the Shelby County  
government;

5. On April 4, 1994, the plaintiff became a policyholder of a long term disability policy with The Standard Insurance Company. The group number is 642998 and the policy number is 00086503;

6. On June 26, 2004, the plaintiff became "Disabled" and eligible for benefits. The defendant paid benefits from July 10, 2004 until January 26, 2005. The maximum benefit period for Short Term Disability is twenty-six (26) months;

7. The plaintiff subsequently filed a claim for Long Term Disability benefits which were denied;

8. The plaintiff has been diagnosed with sleep apnea, coronary atherosclerotic, heart disease, neurocardiogenic syncope, pulmonary hypertension, hyperlipidemia, chronic obstructive pulmonary disease, pulmonary fibrosis, spinal stenosis, scoliosis, and left knee pain;

9. On or about February 1, 2006, the plaintiff appealed this decision denying benefits and the defendant affirmed the denial on April 28, 2006;

10. The plaintiff's medical condition renders her "Disabled" as defined in **"DEFINITION OF DISABILITY"** under the group policy which is the subject of this litigation;

11. The plaintiff has appealed all denials of her applications for long term disability benefits and all administrative remedies have been exhausted;

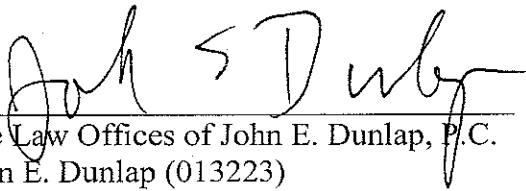
12. The defendant has failed and neglected to pay benefit under said policy and plan which benefits amounting to sixty-six and two-thirds ( $66 \frac{2}{3}$ ) of the plaintiff's gross monthly income for each month she is unable to engage in material and substantial employment duty;

13. There will be additional benefits due after the filing of this lawsuit as the plaintiff remains disabled;

14.     **The plaintiff remains disabled and has been approved for Social Security disability benefits.**

**WHEREFORE**, the plaintiff prays for judgment against the defendant for all accrued benefits, for any additional months she is disabled under the policy, for pre-judgment and post-judgment interest, for attorney fees and other relief the court deems just and proper under the circumstances.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "John E. Dunlap", is written over a horizontal line.

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